

Date of Doc:

04-16-01

PTO/SB/05 (03-01)

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A

I hereby certify that this paper is being filed under 37 CFR 1.13(d). Please type or print plus sign (+) inside this box. →

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Commissioner for Patents, Washington, DC 20231

**UTILITY****PATENT APPLICATION TRANSMITTAL**

Name of Person Signing (Type or Print)

Signed:

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 27211/04031

First Inventor JEFFREY C. DILL

Title Apparatus and Method of CTCM Encoding for A Digital Communication System

Express Mail Label No. EL085013095US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 68]   
*(preferred arrangement set forth below)*
  - x - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - x - Background of the Invention
  - x - Brief Summary of the Invention
  - x - Brief Description of the Drawings (if filed)
    - Detailed Description
  - x - Claim(s)
  - x - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [ Total Sheets 22 ]
5. Oath or Declaration [ Total Pages 5 ]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63 (d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Group Art Unit: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	24024 <i>(Insert Customer No. or Bar Code Label here)</i>		or	<input type="checkbox"/> Correspondence address below
Name	WILLIAM E. ZITELLI			
Address				
City		State		Zip Code
Country		Telephone	216-622-8229	Fax 216-241-0816
Name (Print/Type)	William E. Zitelli	Registration No. (Attorney/Agent)	28,551	
Signature	William E. Zitelli	Date	April 16, 2001	

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

*Patent fees are subject to annual revision*

TOTAL AMOUNT OF PAYMENT	\$660.00
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*Complete if Known*

Application Number	Unknown
Filing Date	April 16, 2001
First Named Inventor	Jeffrey C. Dill
Examiner Name	Unknown
Group Art Unit	

Attorney Docket No.	27211/04031
Express Mail Label No.	EL085013095US

**METHOD OF PAYMENT****FEES CALCULATION (continued)**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	03-0172
Deposit Account Name	
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check in the amount of \$660.00	

**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee Code	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$355.00	Surcharge - late filing fee or oath	
106	320	206	160	Design filing fee		Surcharge - late provisional filing fee or cover sheet	
107	490	207	245	Plant filing fee		Non-English specification	
108	710	208	355	Reissue filing fee		For filing a request for <i>ex parte</i> reexamination	
114	150	214	75	Provisional filing fee		Requesting publication of SIR prior to Examiner action	
SUBTOTAL (1)				\$355.00		Requesting publication of SIR after Examiner action	
2. EXTRA CLAIM FEES							
Total Claims	45	Extra Claims	-20 = 25	Fee from below	Fee Paid	Extension for reply within first month	
Independent Claims	5		- 3 = 2	x 9.00	=225.00	Extension for reply within second month	
Multiple Dependent				x 40.00	=80.00	Extension for reply within third month	
Large Entity Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description		Extension for reply within fourth month	
103	18	203	9	Claims in excess of 20		Extension for reply within fifth month	
102	80	202	40	Independent claims in excess of 3		Notice of Appeal	
104	270	204	135	Multiple dependent claim, if not paid		Filing a brief in support of an appeal	
109	80	209	40	** Reissue independent claims over original patent		Request for oral hearing	
110	18	210	9	** Reissue claims in excess of 20 and over original patent		Petition to institute a public use proceeding	
SUBTOTAL (2)				\$305.00		Petition to revive - unavoidable	
Other fee (specify) _____							

\*\* or number previously paid, if greater. For Reissue, see above

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$ 0

SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	William E. Zitelli	Registration No. (Attorney/Agent)	28,551	Telephone 216/622.8229
Signature	William E. Zitelli		Date	4-16-01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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